

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 C.F.R. 1.63) COMBINED WITH POWER OF ATTORNEY	Attorney Docket No.	9396
	First Named Inventor	Mary Elizabeth Davis
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	October 30, 2003
	Group Art Unit	
	Examiner Name	
	Confirmation Number	

I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DISPOSABLE ABSORBENT ARTICLE HAVING A VISIBLY HIGHLIGHTED WETNESS SENSATION MEMBER the specification of which

(check one) ☒ is attached hereto.
☐ was filed on _____ (MM/DD/YYYY) as United States
Application No. or PCT International Application Serial No. _____
and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

I hereby appoint Practitioners at Customer Number 27752 as my/our attorneys(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Direct all correspondence to Customer Number 27752.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:			
Given Name: Mary Elizabeth (first and middle [if any])		Family Name: Davis Or Surname:	
Inventor's Signature: <i>Mary E. Davis</i>		Date: 10-30-03	
Residence: City: Madeira	State: OH	Country: U.S.A.	Citizenship: U.S.A.
Mailing Address: 7125 Wallace Avenue			
City: Madeira	State: OH	Zip (or Postal Code): 45243	Country: U.S.A.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

(continued)

Attorney Docket No. 9396

NAME OF SECOND INVENTOR:			
Given Name: Donald Carroll (first and middle [if any])		Family Name Roe Or Surname:	
Inventor's Signature:		Date:	
Residence: City: West Chester Township	State: OH	Country: U.S.A.	Citizenship: U.S.A.
Mailing Address: 6324 Emberwood Court			
City: West Chester	State: OH	Zip (or Postal Code): 45069	Country: U.S.A.

NAME OF THIRD INVENTOR:			
Given Name: Patrick Jay (first and middle [if any])		Family Name Allen Or Surname:	
Inventor's Signature:		Date:	
Residence: City: Montgomery	State: OH	Country: U.S.A.	Citizenship: U.S.A.
Mailing Address: 8667 Arcturus Drive			
City: Cincinnati	State: OH	Zip (or Postal Code): 45249	Country: U.S.A.

NAME OF FOURTH INVENTOR:			
Given Name: Edward Paul (first and middle [if any])		Family Name Carlin Or Surname:	
Inventor's Signature:		Date:	
Residence: City: Deerfield Township	State: OH	Country: U.S.A.	Citizenship: U.S.A.
Mailing Address: 6621 Charleston Park Drive			
City: Mason	State: OH	Zip (or Postal Code): 45040	Country: U.S.A.

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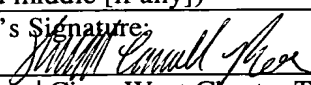
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Fax: 7062162981

NORDSON CORPORATION

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Or Surname:

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10-29-2003

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